

SIGNATURE ENDORSEMENT


THE ONLY SIGNATURES APPLICABLE TO THIS POLICY ARE THOSE REPRESENTING THE COMPANY NAMED ON THE FIRST PAGE OF THE DECLARATIONS.

By signing and delivering the policy to you, we state that it is a valid contract when countersigned by our authorized representative.

ILLINOIS UNION INSURANCE COMPANY
Chicago, Illinois

INA SURPLUS INSURANCE COMPANY
Philadelphia, Pennsylvania


GEORGE D. MULLIGAN, Secretary


SUSAN RIVERA, President

WESTCHESTER SURPLUS LINES INSURANCE COMPANY
Atlanta, Georgia


GEORGE D. MULLIGAN, Secretary


BRIAN E. DOWD, President